## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>05/27/2010</u>	Address:	500 E SR 13 Lot 25
Case #:	16F-19743		North Manchester, IN
County:	Wabash		<u>46962</u>
Type of Laboratory Seizure (check one)  ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Seizure Location ( Residence Outbuilding Vehicle	check all that apply)  Hotel/Motel Open – No Structure Other:
(check all the Lithium Lithium Red Photo Flamma Water R Anhydrock Hydrock Corrosiv Corrosiv Corrosiv	nd: Location (bedroom, kitchen, open ain at apply)  n/Ammonia Reaction(s):  osphorous/Iodine Reaction(s):  able Solvents: Livingroom/Bathroom Reactive Metal (Lithium): Livingroom ous Ammonia:  abloric Acid Gas Generator(s): Kitchen ove Acid: Kitchen ove Base:  tem and location):	<u>1</u>	
Child under age 18 discovered (check one)Investigative Information☑ Yes 3 (number present)☐ Ephedrine/Pseudoephedrine Tracking Log☐ No☐ Retail/Merchant Tip*If yes, fax report to Child Protective Services☑ Other: InvestigationThis report is to be faxed to the following agencies that serve the location:Fire Department: ManchesterFax: 260-982-1341Health Department: Wabash CountyFax: 260-563-6082Child Protection Service: Wabash County			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: B. Russell Phone 765-567-2125			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.